

CLAIMS ONLY							<div style="display: flex; justify-content: space-between;"> Application Number <i>100888005</i> Filing Date </div>	
							Applicant(s)	
* May be used for additional claims or amendments								
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	/							
2		/						
3		/						
4		/						
5		/						
6		/						
7		/						
8		/						
9		/						
10		/						
11		/						
12		/						
13	/	/						
14		/						
15		/						
16		/						
17		/						
18		/						
19		/						
20		/						
21		/						
22		/						
23		/						
24		/						
25		/						
26		/						
27		/						
28		/						
29	/							
30	/							
31								
32								
33								
34								
35								
36								
37								
38								
39								
40								
41								
42								
43								
44								
45								
46								
47								
48								
49								
50								
51								
52								
53								
54								
55								
56								
57								
58								
59								
60								
61								
62								
63								
64								
65								
66								
67								
68								
69								
70								
71								
72								
73								
74								
75								
76								
77								
78								
79								
80								
81								
82								
83								
84								
85								
86								
87								
88								
89								
90								
91								
92								
93								
94								
95								
96								
97								
98								
99								
100								
Total Indep	←		←		←		←	
Total Depend		←		←		←		←
Total Claims								